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TO: Marceau Milord
Examiner, Art Unit 2682

FAX NO.: 703 872 9306

FROM: Michael T. Cruz

CLIENT:1772

MATTER: 15258US03

Number of Pages This Transmission (Including Cover Page): 18

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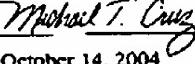
A handwritten signature of Michael T. Cruz is written over a horizontal line. Below the signature, the name "Michael T. Cruz" is typed, followed by "Reg. No. 44,636".

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)		Application Number 09/695,715
Total Number of Pages in This Submission 17	Filing Date October 23, 2000	
	First Named Inventor Ahmadreza Rofougaran	
	Group Art Unit 2682	
	Examiner Name Marceau Milord	
	Attorney Docket Number 15258US03	

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form (1 Page) <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply (14 Pages) <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Exten. of Time Request (1 Page) <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> PTO 1449/08A with references <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) (sheets) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual Name	McAndrews Held & Malloy, L.td.		
Signature			
Date	October 14, 2004		

CERTIFICATE OF FAX TRANSMITTAL

I hereby certify that this correspondence is being sent via facsimile to Marceau Milord, an Examiner of the United States Patent and Trademark Office, at (703) 872-9306 on October 14, 2004.

Name (Print/type)	Michael T. Cruz	Registration No. (Attorney/Agent)	44,636
Signature			Date
			October 14, 2004

PTO/SB/17 (11-00)

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FEE TRANSMITTAL for FY 2005		Complete if Known	
Patent Fees are subject to annual revision.		Application Number	09/695,715
TOTAL AMOUNT OF PAYMENT (\$110.00)		Filing Date	October 23, 2000
		First Named Inventor	Ahmadreza Rofougaran
		Examiner Name	Marceau Milord
		Group Art Unit	2682
		Attorney Docket No.	15258US03

METHOD OF PAYMENT				FEE CALCULATION (continued)																																																																																																																																							
<p>1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:</p> <p>Deposit Account Number: 13-0017</p> <p>Deposit Account Name: McAndrews Held & Malloy</p> <p><input checked="" type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17</p> <p><input type="checkbox"/> Applicant claims small entity status Sec 37 CFR 1.27</p> <p>2. <input type="checkbox"/> Payment Enclosed: <input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Other</p>				<p>3. ADDITIONAL FEES</p> <table border="1"> <thead> <tr> <th>Large Entity Fee Code (\$)</th> <th>Small Entity Fee Code (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr> <td>1051</td> <td>130</td> <td>2051</td> <td>65 SurchARGE - late filing fee or cash</td> </tr> <tr> <td>1052</td> <td>50</td> <td>2052</td> <td>25 SurchARGE - late provisional filing fee or cover sheet</td> </tr> <tr> <td>1053</td> <td>130</td> <td>1053</td> <td>130 Non-English specification</td> </tr> <tr> <td>1612</td> <td>2,520</td> <td>1812</td> <td>2,520 For filing a request for ex parte reexamination</td> </tr> <tr> <td>1604</td> <td>920*</td> <td>1804</td> <td>920* Requesting publication of SIR prior to Examiner action</td> </tr> <tr> <td>1805</td> <td>1,640*</td> <td>1805</td> <td>1,640* Requesting publication of SIR after Examiner action</td> </tr> <tr> <td>1251</td> <td>110</td> <td>2251</td> <td>55 Extension for reply within first month</td> </tr> <tr> <td>1252</td> <td>430</td> <td>2252</td> <td>215 Extension for reply within second month</td> </tr> <tr> <td>1253</td> <td>660</td> <td>2253</td> <td>490 Extension for reply within third month</td> </tr> <tr> <td>1254</td> <td>1,330</td> <td>2254</td> <td>765 Extension for reply within fourth month</td> </tr> <tr> <td>1255</td> <td>2,080</td> <td>2255</td> <td>1,040 Extension for reply within fifth month</td> </tr> <tr> <td>1401</td> <td>340</td> <td>2401</td> <td>170 Notice of Appeal</td> </tr> <tr> <td>1402</td> <td>340</td> <td>2402</td> <td>170 Filing a brief in support of an appeal</td> </tr> <tr> <td>1403</td> <td>300</td> <td>2403</td> <td>150 Request for oral hearing</td> </tr> <tr> <td>1451</td> <td>1,510</td> <td>1451</td> <td>1,510 Petition to institute a public use proceeding</td> </tr> <tr> <td>1452</td> <td>110</td> <td>2452</td> <td>55 Petition to revive - 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SUBMITTED BY					
Name (Print/Type)	Michael T. Cruz	Registration No. (Attorney or Agent)	44,636	Telephone	312-775-8084
Signature	<i>Michael T. Cruz</i>		Date	Complete if applicable	
October 14, 2004					

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